L07000050846

(Requestor's Name)				
(Address)				
(
•				
(Address)				
(City/State/Zip/Phone #)				
•				
PICK-UP WAIT MAIL				
				
(Business Entity Name)				
(Document Number)				
Codification of Chabus				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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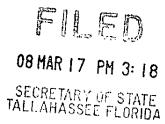
OB MAR 17 PH 3: 18

COVER LETTER

	O: Registration Section Division of Corporations				
SUBJECT					
	(Name of Limite	ed Liability Company)			
The enclos filing.	ed member, managing member or m	nanager resignation and fee(s) are submitted fo			
Please retu	rn all correspondence concerning th	is matter to:			
Kathy M	lerrifield				
	(Contact Person)				
Martin, I	Field and Park Enterprises	, LLC			
	(Firm/Company)				
1678 Ca	anton Lane				
	(Address)				
Oviedo,	FL 32765				
	(City/State and Zip Code)				
For further	information concerning this matter	, please call:			
Robert \		at (763) 783-0202			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed p	lease find a check made payable to	the Florida Department of State for:			
-	\$25 Filing Fee	\$55 Filing Fee &			
		Certified Copy			
STREET/	COURIER ADDRESS:	MAILING ADDRESS:			
Registratio	n Section	Registration Section			
Division of	Corporations	Division of Corporations			
Clifton Bu		P.O. Box 6327			
	utive Center Circle	Tallahassee, Florida 32314			
Tallahasse	e, Florida 32301				

CR2E079 (5/06)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as rtin, Field and Park E		s of the Florida Department
2. This limited liab	ility company was organized	l under the laws of:	
3. The Florida doc LO700005	ument/registration number of 0846	f this limited liability con	npany is:
_{4. I.} Robert Varani		, hereby resign as a	Manager/Member
(Print A	ame of Person Resigning)		(Print Title)
of this limited lia resignation in wr	bility company and affirm thiting.	e limited liability compa	ny has been notified of my
Signature of Res	gning Member, Managing M	fember or Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		